CITY OF BELLAIRE
CITY COUNCIL AND
PLANNING AND ZONING COMMISSION

Minutes of Meeting
April 26, 2010

SPECIAL SESSION (JOINT PUBLIC HEARING) – 6:15 P.M.

SUBJECT: Specific Use Permit Request from Lenox Hill Holdings, Ltd. to Construct and Operate a Hospital at the corner of Bissonnet Street and First Street, in Bellaire, Harris County, Texas, in the R-M.2 Residential-Commercial Mixed-Use Zoning District.

A. CALL TO ORDER AND ANNOUNCEMENT OF A QUORUM OF MEMBERS OF CITY COUNCIL – Mayor Cindy Siegel.

Mayor Cindy Siegel called the City Council of the City of Bellaire, Texas, to order at 7:09 p.m. on Monday, April 26, 2010. The Bellaire City Council met at that time and on that date in Special Session in the Council Chamber, First Floor of City Hall, 7008 South Rice Avenue, Bellaire, Texas, for the purpose of holding a joint public hearing with the Planning and Zoning Commission of the City of Bellaire, Texas, on a request from Lenox Hill Holdings, Ltd. to construct and operate a hospital at the corner of Bissonnet Street and First Street in Bellaire, Texas.

Mayor Siegel announced that a quorum was present consisting of herself and the following members of City Council:

Councilman Will Hickman, Position No. 1;
Councilman James P. Avioli, Sr., Position No. 2;
Councilman Corbett Daniel Parker, Position No. 3;
Mayor Pro Tem Phil Nauert, Position No. 4;
Councilman Andrew Friedberg, Position No. 5; and
Councilwoman Mandy Nathan, Position No. 6.

Other officials present were Assistant City Manager Diane K. White, City Clerk Tracy L. Dutton, and Director of Community Development John McDonald.

B. CALL TO ORDER AND ANNOUNCEMENT OF A QUORUM OF MEMBERS OF THE PLANNING AND ZONING COMMISSION – Chair Bill Thorogood.

Chair Bill Thorogood called the Planning and Zoning Commission of the City of Bellaire, Texas, to order at 7:09 p.m. on Monday, April 26, 2010. The Bellaire Planning and Zoning Commission met at that time and on that date in Special Session in the Council Chamber, First Floor of City Hall, 7008 South Rice Avenue, Bellaire, Texas, for the purpose of holding a joint public hearing with the City Council of the City of Bellaire, Texas,
on a request from Lenox Hill Holdings, Ltd. to construct and operate a hospital at the corner of Bissonnet Street and First Street in Bellaire, Texas.

Chair Thorogood announced that a quorum was present consisting of himself and the following members of the Planning and Zoning Commission:

Vice Chair and Commissioner Michael Doyle;
Commissioner Lori Aylett;
Commissioner Peter Boecher;
Commissioner Winfred Frazier;
Commissioner Donna Rickenbacker; and
Commissioner Paul C. Simmons.

C. READING OF NOTICE OF JOINT PUBLIC HEARING – City Clerk Tracy L. Dutton.

City Clerk Tracy L. Dutton read the “Notice of Joint Public Hearing” into the record as follows:

Notice is hereby given that the City Council of the City of Bellaire, Texas, has called, by ordinance, a joint public hearing before the City Council of the City of Bellaire, Texas, and the Planning and Zoning Commission of the City of Bellaire, Texas, on Monday, the 26th day of April, 2010, at 6:15 p.m. in the Council Chamber, First Floor of City Hall, 7008 South Rice Avenue, Bellaire, Texas, at which time and place any and all persons desiring to be heard will be heard on or in connection with any matter or question involving the application and request submitted by Jacobo Varon, M.D., and Lenox Hill Holdings, Ltd. for a specific use permit to construct and operate a hospital to be located on a 0.64 acre parcel legally described as all of Lot 25 and the residue of Lots 20, 21, 22, 23, 24, and 26 in Block 2, and a 0.359 acre parcel legally described as Lot 7 and 8 in Block 3, both within the Town of Bellaire Addition, a subdivision in Harris County, Texas, and that section of Chestnut Street between Bissonnet Street and First Street (21,986 square feet) out of the James Blessing Survey, Abstract 162, in the City of Bellaire, Harris County, Texas, in the R-M.2 Residential-Commercial Mixed-Use Zoning District.

Prior to the joint public hearing, any person may review the referenced application and request at the City of Bellaire’s Office of Community Development, City Hall, 7008 South Rice Avenue, Bellaire, Texas, from 8:00 a.m. to 5:00 p.m., Monday through Friday, except for holidays.
City Clerk Dutton advised that the “Notice of Joint Public Hearing” was posted on the City’s bulletin board on April 6, 2010, and published in the legal notices section of the Southwest News on April 6, 2010. Notices were mailed to real property owners of record within 200 feet of the requested specific use permit on April 5, 2010. Fifty-nine (59) property owners and 64 separate properties that were notified. Three notices were returned as undeliverable: Lenox Hill Holdings, Ltd., Varon Family, and Thomas F. Hastings, Jr.

D. SUMMARY OF JOINT PUBLIC HEARING PROCEDURE – Assistant City Manager Diane K. White.

Assistant City Manager Diane K. White summarized the joint public hearing procedure for the evening as follows:

During this evening’s joint public hearing, a brief presentation will be given regarding an application and request submitted by the applicant, Jacobo Varon, M.D., and Lenox Hill Holdings, Ltd., for a specific use permit to construct and operate a hospital at the corner of Bissonnet Street and First Street in Bellaire, Harris County, Texas, in the R-M.2 Residential-Commercial Mixed-Use Zoning District. The presentation will be limited to fifteen (15) minutes.

At the conclusion of the presentation, the Mayor will recognize citizens or other interested parties who have completed the sign-in sheet prior to commencement of the meeting. Comments will be limited to five (5) minutes for each individual.

At the conclusion of comments from citizens or other interested parties, the Planning and Zoning Commission and the Mayor and City Council will have an opportunity to ask questions of the applicant regarding the application.

Following the question and answer session, the Mayor will close the joint public hearing. Public comment will not be received following the close of the joint public hearing. Written comments may be submitted to the City Council in care of the City Clerk prior to final deliberation on the matter. Final deliberation is anticipated to occur on Monday, May 3, 2010. Written comments must be submitted to City Council prior to deliberation on this matter in order to be considered for the record. Written comments should be submitted by noon on Thursday, April 29, 2010. Final deliberation by the Planning and Zoning Commission will occur during a Special Session on Tuesday, April 27, 2010.
The sign-in sheet and written comment sheets have been provided at the entrance to the Council Chamber.

E. PRESENTATION regarding an application and request submitted by Jacobo Varon, M.D., on behalf of Lenox Hill Holdings, Ltd., for a specific use permit to construct and operate a hospital at the corner of Bissonnet Street and First Street in Bellaire, Harris County, Texas, in the R-M.2 Residential-Commercial Mixed-Use Zoning District – Presented by Jacobo Varon, M.D.; Item submitted by Director of Community Development John McDonald.

Director of Community Development John McDonald advised that under the zoning regulations for the R-M.2, Residential-Commercial Mixed-Use Zoning District, a hospital was not considered a permitted use or use by right. A hospital was allowed as a specific use and, therefore, needed extra review. The extra review consisted of a public hearing before the Planning and Zoning Commission of the City of Bellaire, Texas, and City Council of the City of Bellaire, Texas, before approval of that use.

Dr. Jacobo Varon, Plastic Surgeon and Part Owner of Lenox Hill Holdings, Ltd., and First Street Holdings, owners and operators of a hospital located at the corner of Bissonnet Street and First Street in Bellaire, Texas, advised that he and his partners had, earlier in the evening, petitioned City Council for permission to purchase the Chestnut Street right-of-way which separated properties owned by Lenox Hill Holdings, Ltd. and First Street Holdings.

First Street Surgical Center was noted to be located on the south side of Chestnut Street with First Street Hospital was on the north side of Chestnut Street and the existing shopping center on the west side of Chestnut Street. First Street itself was noted to be on the east side of Chestnut Street. Lenox Hill Holdings, Ltd. or First Street Holdings owned all of the property surrounding Chestnut Street.

Essentially, the reason for the request to purchase the street right-of-way was because the applicants (Lenox Hill Holdings, Ltd. and First Street Holdings) desired to expand First Street Hospital. In order to do so, the applicants needed to purchase the street right-of-way to meet the City’s requirement for floor to area ratio.
F. RECOGNITION OF CITIZENS AND/OR OTHER INTERESTED PARTIES – Mayor Cindy Siegel.

Kurt Nelson, 4817 Beech Street, Bellaire, Texas:

Mr. Nelson advised that he lived one block away from Bissonnet Street and was very much concerned and interested in the specific use permit application before the Planning and Zoning Commission and City Council this evening. He advised further that he had lived in his home for 15+ years and the hospital and surgical center had been built and were operating during that time.

Mr. Nelson had not noticed much traffic or noise. He had anticipated that there would be some with an emergency room located in the hospital, but he had not heard sirens in the middle of the night. His question was related to what Dr. Varon anticipated the impact would be on usage of the emergency room, as well as noise, due to the increase in size of the hospital (i.e., tripling the number of beds).

Similarly, the current plan envisioned a two-story building. Mr. Nelson wanted to know what would be involved if Dr. Varon decided to increase the size of the hospital by building a five-story or greater building. In other words, would Dr. Varon have to come back to the City for further review if the height of the building were greater than the anticipated two stories?

In summary, Mr. Nelson’s two concerns were the amount of activity expected and what restrictions, if any, there were on the use of sirens for the area, as well as the height restriction. Mr. Nelson was not against having the hospital in his backyard. He stated that it was a good idea to have hospitals nearby.

Mayor Cindy Siegel advised that she would make sure that she asked Mr. Nelson’s questions of the applicant this evening.

Lynn McBee, 5314 Evergreen Street, Bellaire, Texas:

Ms. McBee indicated that it was her understanding that a specific use permit would be the vehicle by which the City Council could determine what types of impacts a development might have upon adjoining or adjacent properties. Such impacts could be related to noise, traffic, lighting, etc.

Given that the applicant was also the owner of the entire site, which included leased businesses, then the expansion of the hospital could generate a greater amount of traffic, which would be housed at grade on the site, and could conceivably displace parking required by the tenants. Ms. McBee
indicated that she had not seen a traffic study or discussion regarding this issue.

Ms. McBee further understood that the site would be cleared of some of the businesses and at grade parking would take the place of those businesses. She did not know the number of parking spaces estimated for the combined businesses and a hospital or the number of parking spaces that would be available on the site. That type of information was not included in the agenda packet.

The new parking lot would obviously have lighting. The site currently had little landscaping, but she hoped that the City would include a condition for landscaping, as well as lighting, in the parking lot.

Ms. McBee next referred to the lack of bicycle racks on commercial properties. She indicated that bicycle racks should be required automatically, just as the City might require landscaping, to encourage people to use methods of transportation other than vehicular means.

The only issues that Ms. McBee felt might be of concern to the residential neighborhood were noise, traffic, and lighting. Since the applicant was also the owner of the property and responsible for the tenants on the property, then there should be some mitigation of any impacts by those tenants on the site. She knew that one business was apparently moving, noting that this business had created some parking and noise issues in the past. She asked if the specific use permit could be provided to require the owner of a property and the owner of the specific use permit to be responsible for the mitigation of any impacts to businesses that were located on that property.

Ms. McBee advised that the applicant had done a credible job of presenting openly the information that he had. City Staff had gone so far as to suggest that a 25-foot easement be granted to the City for a future sanitary sewer location. Ms. McBee had not been convinced that this was a wise thing to do, but she would leave that decision or determination to the wisdom of City Council.

In closing, she stated that the fact that City Staff had made a recommendation before the Planning and Zoning Commission had an opportunity to speak seemed out of place to her. City Staff should be silent until the Planning and Zoning Commission had spoken. She knew that the Planning and Zoning Commission would send a thoughtfully produced recommendation to City Council once they had completed their deliberation on the matter.
G. QUESTIONS FROM THE PLANNING AND ZONING COMMISSION OF THE CITY OF BELLAIRE, TEXAS – Chair Bill Thorogood.

Vice Chair and Commissioner Michael Doyle asked for clarification from Director of Community Development John McDonald that the specific use permit was for the expansion of the hospital itself. He inquired as to whether that permit included the entire tract because of the City’s requirements for floor to area ratio and parking.

Director of Community Development John McDonald advised that the specific use permit would be granted to the property that the expansion of the hospital would be constructed upon, as well as the portion of Chestnut Street that did not include the sky bridge, and the area where the portion of the shopping center would be demolished and at grade parking added.

In other words, the existing restaurant, businesses next to the restaurant, and medical offices of Dr. Varon on the south side of the street would be outside of the specific use permit.

Vice Chair Doyle inquired as to whether Director McDonald had taken a look at the overall parking requirements and provided a plan for parking.

Director McDonald advised that Community Development had done that. He pointed out that the restaurant would require 88 parking spaces, and the current site did not have 88 parking spaces on it. The restaurant was considered a nonconforming existing usage. A 22-bed addition to the hospital required 22 parking spaces. Approximately 10,000-15,000 square feet of retail space would be removed at four parking spaces per square foot. Therefore, considering the addition of hospital beds versus a reduction in the retail square footage, there would actually be a net gain in the number of parking spaces available.

Vice Chair Doyle asked for confirmation that there were additional parking spaces as opposed to the requirement for parking spaces.

Director McDonald advised that Vice Chair Doyle was correct. The demand with the hospital was roughly 30 spaces less than the current existing property because a hospital had a lower parking requirement than retail businesses.

Mayor Cindy Siegel asked if Director McDonald could provide the parking numbers for the Planning and Zoning Commission and City Council prior to deliberation.

Vice Chair Doyle advised that he understood that 17 hospital beds were to be added. He inquired as to whether the hospital would have 22 hospital beds in total after the expansion.
Director McDonald stated that he believed that 22 hospital beds were being added.

Vice Chair Doyle indicated that he thought 17 beds were being added.

Dr. Jacobo Varon advised that 14 hospital beds would be added to the five beds on the site currently. In total, there would be 19 hospital beds.

Vice Chair Doyle asked for confirmation that 14 hospital beds would be added to the five beds already existing.

Dr. Varon advised that Vice Chair Doyle was correct.

Vice Chair Doyle stated that the traffic study indicated that 22 hospital beds were being added to the five existing hospital beds.

Director McDonald advised that the traffic study was performed on the basis that there might be a total of 27 hospital beds.

Vice Chair Doyle stated that the traffic study also referred to a medical office building.

Director McDonald indicated that the medical building was not actually on the site, but was next to it and had its own onsite parking.

Vice Chair Doyle advised that he was confused by the fact that some of the property was not being considered as part of the land use. He asked for the square footage of the expansion itself.

Dr. Varon stated that the expansion was roughly 21,000 square feet.

Vice Chair Doyle asked for confirmation that the number given by Dr. Varon was just for the expansion.

Dr. Varon advised that Vice Chair Doyle was correct.

Vice Chair Doyle asked for the square footage of the existing hospital.

Dr. Varon stated that the existing hospital was roughly 19,000-20,000 square feet.

Vice Chair Doyle advised that he understood, having performed traffic studies, that traffic generated by hospitals was much less than traffic generated by retail businesses. He referred to a current tenant, SSQ, noting that the parking lot was fairly crowded as a result of that tenant.
He asked for confirmation that the ambulances would enter the hospital at the rear of the site and if the reason was due to the fact that the triage area was located in the rear of the existing hospital.

**Dr. Varon** advised that the emergency room was in the rear of the hospital on Chestnut Street and First Street. This was where the ambulances would have to go, as this was the only way for them to reach the emergency room immediately. The entrance from Bissonnet Street would only be used to drop patients off. He felt that traffic generated by the hospital would be much less than existed currently.

The same number of surgeries that currently occurred between the surgical center and hospital would not change. The problem that existed was that some of the patients could not stay overnight. As an ambulatory surgical center, a patient could only be kept 23 hours or less, then that patient had to go home. There were certain surgeries that required an overnight stay for pain control or to be monitored. This was the main reason for the need to expand the hospital.

He noted further that he and his partners did not plan on asking for any more expansions of their existing facility.

**Vice Chair Doyle** asked for confirmation that the stacking area off of Bissonnet Street to the front entrance of the hospital was approximately 31 feet.

**Director McDonald** indicated that he believed the stacking area was approximately 38 feet.

**Vice Chair Doyle** referred to one or two parking spaces located at the entrance and inquired as to what those spaces were for.

**Dr. Varon** indicated that those spaces were to be used to drop patients off as well.

**Vice Chair Doyle** referred to First Street and asked if there were parking spaces available on the north side of the center.

**Director McDonald** stated that he believed those were parking spaces.

**Craig Grassle, AIA, President of Neo Architects, LLC, 7026 Old Katy Road, Suite 307, Houston, Texas 77024,** stated that the Texas Department of Health required that a hospital had to have a separate entrance for ambulances and a separate main entrance. The front stacking area was designed for valet parking drop-off. The canopy area was 80 feet long (which would accommodate four cars at one time), as well as a lane to
the left side for additional drop-off. The area also allowed fire vehicles to come into the area rather than remaining on the street.

Vice Chair Doyle referred to the angles on the entrance and exits on the driveways.

Mr. Grassle advised that the angles were quite adequate for the turning radiuses of cars and large vehicles.

Vice Chair Doyle referred to the entrance from First Street and inquired as to the passageways.

Mr. Grassle indicated that they were trying to keep the lighting level very low in the area, as the patients were oriented on the back facing Chestnut Street. This also eliminated any noise activity off of Bissonnet Street. The passageways that Vice Chair Doyle referred to were LED light passageways (i.e., solar-activated LED lights).

Vice Chair Doyle inquired as to whether there were any other lighting concerns that the City needed to know about.

Mr. Grassle stated that the two existing light posts in the parking lot would be relocated into the parking lot to the west and south to light the parking area. In addition, there would be low bollard lighting for general lighting.

Commissioner Peter Boecher indicated that he had several questions for Mr. Grassle. He referred to the drop-off area along Bissonnet Street and noted that at the eastern end there appeared to be one or two parking spaces.

Mr. Grassle indicated that Commissioner Boecher was correct. Those parking spaces were required by the Texas Department of Health for dietary and laundry pickup. Those vehicles might come to the facility twice per day for loading or unloading of materials necessary for the hospital to operate.

Commissioner Boecher asked if those spaces currently existed.

Mr. Grassle advised that those spaces currently existed, but would be widened as a loading area.

Commissioner Boecher asked whether the vehicles would back in to or out of the loading spaces.

Mr. Grassle advised that the vehicles would back in to the loading spaces.
Commissioner Boecher stated that he was concerned that part of the maneuvering activity for the vehicles would occur in the main lanes of Bissonnet Street.

Mr. Grassle stated that hopefully that would not occur.

Commissioner Boecher asked for confirmation that there was enough room on the private property for the maneuvering to occur on the property.

Mr. Grassle advised that he believed there was.

Commissioner Boecher indicated that he was still concerned about that. He next referred to two locations on the survey with the notation “grass pavers.” He inquired as to the purpose of the grass pavers.

Mr. Grassle advised that once the street was purchased, Dr. Varon and his partners would not have the 75% that was necessary for impervious coverage. They were, therefore, proposing some pavement with grass.

Commissioner Boecher inquired as to the type of product that Mr. Grassle’s firm was recommending.

Mr. Grassle advised that he did have a specification on the product, but it was not with him this evening.

Commissioner Boecher referred to Director McDonald and stated that he thought the Planning and Zoning Commission and City had already addressed the use of pavers.

Director McDonald stated that he was not aware that Dr. Varon was using grass pavers as part of his coverage requirement. He indicated that grass pavers were not allowed as a way to meet the impervious coverage requirement.

Commissioner Boecher noted that there was an issue with the application regarding pervious coverage.

Mr. Grassle inquired as to whether the applicant could submit the product for approval, noting that it was not a normal product.

Director McDonald indicated that the City Code specifically prohibited pavers.

Mr. Grassle stated that the product he was talking about were not pavers.

Commissioner Boecher advised that the City went through this process some time back with respect to whether alternative forms of paving would
count toward reducing impervious coverage. It was his understanding that the City’s Code was changed in relation to the use of alternate forms of paving.

**Director McDonald** agreed that the use of alternative forms of paving did not provide a break with respect to the impervious coverage requirement.

**Commissioner Boecher** stated that he was also concerned with the west driveway on Bissonnet Street. He indicated that the driveway was supersized.

**Mr. Grassle** advised that the driveway had not been changed—it was that large currently. He indicated that he could propose a change after the traffic engineering was completed.

**Director McDonald** indicated that the City’s traffic engineers had commented on the driveway and those comments were forwarded to Mr. Grassle today. The comments related to a proposed modification of the driveway off of Bissonnet Street.

**Mr. Grassle** stated that he believed the recommendation was to put a median in the driveway area.

**Commissioner Boecher** expressed a concern that with the current configuration there were all sorts of maneuvering situations that could occur. He next referred to the valet parking mentioned earlier. He asked if this meant that a certain number of spaces onsite would be marked off as “valet parking spaces.”

**Mr. Grassle** indicated that the valet parking company had contracted for 35 parking spaces offsite for valet parking.

**Commissioner Boecher** referred to Director McDonald and the existing survey of the site. He stated that within the right-of-way of Chestnut Street, the survey showed not only the 12” sanitary sewer line, but two laterals coming off of the sanitary sewer line, and a notation for a 12” storm sewer line all within the right-of-way.

**Director McDonald** stated that the storm sewer line would be abandoned in place. The owners of the property would be responsible for that abandoned line as it only serviced the owners’ property.

**Commissioner Boecher** advised that toward the western end there was an 8” sanitary lateral and further west was a 10” sanitary sewer lateral coming off a 12” sanitary sewer line parallel to Bissonnet Street.
Mr. Grassle indicated that it was his understanding that the proposed line be abandoned and relocated by the City of Bellaire. Mr. Grassle noted further that there was a 12” line that came off of First Street and ran about one-third of the way down the property in the middle of Chestnut Street.

Councilman Andrew Friedberg referred to a drawing that was included in City Council’s packet that depicted the lines that Commissioner Boecher was referring to.

Mr. Grassle advised that his understanding was that this was not a City storm sewer line and that it was installed by First Street Hospital during construction of the initial hospital. It stopped where the asphalt and the concrete line of the street met at this point.

Commissioner Boecher advised that he felt it was important that everyone was aware of what was in the public right-of-way.

Director McDonald advised that the only issue that he and Director of Public Works Joe Keene had discussed was the sanitary sewer lines.

Commissioner Boecher asked if Director McDonald would provide information to the Planning and Zoning Commission and City Council on floor to area ratios and parking spaces.

Director McDonald advised that he would do so.

Commissioner Boecher pointed out that when one went through the specific use permit process in Houston, another component of the appraisal process was the depreciated value of existing utilities within a public right-of-way.

Commissioner Paul C. Simmons started with the traffic study. He indicated that statements had been made a number of times during this meeting that there would be less traffic. He agreed with that statement, but noted that there were other things involved with a traffic study. He asked if Director McDonald could advise as to the status of the traffic study and as to the scope of the study.

Director McDonald advised that the City had not received a Traffic Impact Analysis. The City had received a potential traffic generator report.

Commissioner Simmons asked Mr. Grassle if he was doing anything with regard to traffic.

Mr. Grassle advised that a traffic study was ongoing with the same company that prepared the initial potential traffic generator report.
Commissioner Simmons inquired as to whether Mr. Grassle knew the scope of the study.

Mr. Grassle advised that he did not know the scope of the study, but could have someone address that during the Planning and Zoning Commission meeting on Tuesday.

Commissioner Simmons advised that he would appreciate it. He indicated that his concerns were site distances and turning movements. The new configuration put a burden on turning movements, in his opinion. He could not speak specifically to the site distances, but indicated that those distances needed to be reviewed.

Mr. Grassle asked for clarification of Commissioner Simmons’ concerns.

Commissioner Simmons advised that he was concerned with site distances, especially with respect to turning movements. There was currently grass where a building would be, meaning that there were currently no obstructions. By site distances, he meant that when a driver needed to turn onto a street from the site, could the driver see around the proposed building?

Mr. Grassle stated that the traffic pattern proposed for the site was better than the traffic pattern that currently existed on the site.

Commissioner Simmons indicated that he was not sure about that.

Mr. Grassle advised that the stacking area in front for valet parking would result in controlled drivers. The remainder of the parking would be to the west of the property. He advised that he would address that on the site survey.

Commissioner Simmons stated that he would like to see that and noted that the abandonment of Chestnut Street, which was the topic of an earlier meeting, resulted in a driveway. The valet parking would not address all of the vehicles that would be coming and going from the site.

Mr. Grassle stated that the valet parking was a one-way traffic area.

Commissioner Simmons inquired as to the area from the sky bridge to Bissonnet Street.

Mr. Grassle advised that the area Commissioner Simmons referred to in the vicinity of the sky bridge and Bissonnet Street was for two-way traffic.

Commissioner Simmons indicated that the site would not have full control of traffic movements by valet drivers. He would like to see that, in
conjunction with the turning movements and site distances associated with the site, included in the study. It might not be an issue, but at this point Commissioner Simmons was not sure.

As an example, he referred to one palm tree at the end of his block that created a problem for everyone on the block. Commissioner Simmons felt that there was a lack of information currently, which always concerned him.

Commissioner Simmons next stated that the existing commercial portion of the site was different from everything else that had been proposed for the site. He noted that the leases would eventually expire. He asked if there were a plan for that area in the complex. He also asked if there was a plan for any additional construction and if a specific use permit would be required for the additional construction.

Director McDonald stated that Dr. Varon had not shared any knowledge of expansions beyond the one requested this evening. If at some point in time Dr. Varon desired to replace the existing commercial portion on the south side of his property with additional hospital facilities, then Dr. Varon would have to amend his specific use permit.

Commissioner Simmons asked if there were a plan for the existing commercial property right now.

Dr. Varon indicated that there was no plan for the existing commercial property right now. On the other hand, he would like to maintain the existing commercial businesses because those businesses served a purpose for the hospital. For example, the restaurant was used for hospital employees and by patients. There would be a small cafeteria inside the hospital, and Dr. Varon and his partners planned to use the restaurant to provide food for the cafeteria. In addition, many of his patients used the nail salon while waiting for surgery.

Commissioner Simmons advised that the fact that an amendment to the specific use permit would be required to make any dramatic changes calmed his concerns.

Mr. Grassle noted that Dr. Varon and his partners did not have enough floor to area ratio to make any further expansions.

Commissioner Lori Aylett inquired as to the maximum height in the R-M.2 Zoning District.

Director McDonald indicated that the maximum height in the R-M.2 Zoning District was two stories.
Commissioner Aylett advised that she was still not clear as to what the specific use permit was tied to. For example, was it tied to the land or to the plan for construction? She noted that if it were tied to the land, she would appreciate it if Director McDonald could point to the properties to which the specific use permit applied.

Director McDonald indicated that the specific use permit would be tied to one area, Lot 1B.

Commissioner Aylett asked if the Planning and Zoning Commission in the past had ever conditioned the granting of an easement (storm sewer, sanitary sewer line, or something of that nature).

Director McDonald stated that he was not able to answer that question.

Commissioner Aylett advised that her concern was the 12” sanitary sewer line that was running through City right-of-way. Until the street was abandoned, the line was still on public right-of-way. She indicated that if the City had been asked to move that line, then that was City Council’s purview. She asked if there were anything the Planning and Zoning Commission could do to plat an easement for that 12” line.

Director McDonald stated that the specifics as to the line could be discussed further on Tuesday night when the City Attorney was present. The replat was contingent on the sale of the street right-of-way being approved. If nothing happened, then the replat would be denied.

Commissioner Aylett inquired as to whether Director McDonald was referring to the replat or the specific use permit.

Director McDonald advised that both were contingent on the sale of the property. In order for the project to become viable, all of the pieces had to come together.

Commissioner Aylett noted that it seemed as if the pieces were being addressed in backwards order.

Director McDonald agreed, but stated that it all worked on paper.

Commissioner Aylett referred to some concerns expressed by residents with respect to noise. She asked if there were anything in particular that the Planning and Zoning Commission could consider in addition to the zoning regulations already in place with respect to noise.

Director McDonald stated that he believed that the Planning and Zoning Commission could look at additional barrier requirements. The Community Development Department had not received any complaints in the area related
to noise. He did not believe that the emergency room operated as a “typical” emergency room. It was required as a rule of being a hospital. It could take traffic, but Director McDonald did not believe that the typical person picked up on a 911 call would be rushed to First Street Surgical Hospital.

Commissioner Aylett referred to the addition of 15 beds or 22 beds and asked if Dr. Varon was envisioning any change in the way the emergency room worked.

Dr. Varon stated that the existing hospital had been in operation for three and one-half years and there had never been any concern with noise (sirens). To the best of his knowledge, no one had ever complained about that. The only thing the expansion would do was to provide the patients having surgeries at this time an opportunity to stay overnight or to be taken care of for a couple of days more.

Commissioner Aylett noted that it was a bit of an operational change, noting that Dr. Varon was allowed to keep patients for 23 hours now and with the change, he would be able to keep patients longer.

Dr. Varon stated that the First Street Surgical Center, which was located at 411 First Street, was an ambulatory surgical center and would continue operating the same way. The hospital that had been in operation for three and one-half years was allowed to keep the patients 3-5 days or longer, as necessary.

Commissioner Donna Rickenbacker referred to the sanitary sewer line and asked whom the line benefited. For example, were adjacent property owners utilizing that line?

Director McDonald stated that the sanitary sewer line came up Bissonnet Street and connected to the line on Chestnut Street and ran on to First Street. Public Works Director Joe Keene’s plan would be to carry the line up Bissonnet Street to First Street and totally bypass the line on Chestnut Street. Currently, the line did carry waste from additional properties.

Commissioner Rickenbacker referred to the existing commercial leased space onsite. She asked if new commercial entities could use the same footprint without having to come back for a specific use permit amendment.

Director McDonald advised that the retail businesses were not included in the specific use permit and could do anything that was permitted under the R-M.2 Zoning District now.

Commissioner Rickenbacker referred to the offsite valet parking and asked for confirmation that there would be approximately 30 spaces available for valet parking.
Dr. Varon stated that he and his partners had already contracted for 35 spaces offsite. The valet service would not park the cars in the street. The parking garage for the valet parking was located in an office building across the street.

Commissioner Winfred Frazier referred to a question asked earlier of Dr. Varon by Mayor Pro Tem Dr. Phil Nauert related to a “Certificate of Need.” It was noted that a “Certificate of Need” was no longer required in Texas, but was required in 36 other states. He inquired as to what might happen today if that Certificate of Need was still required in the State of Texas.

Dr. Varon advised that he did not believe his facility would be affected at all because it was already an existing hospital.

Commissioner Frazier noted that a traffic impact analysis had not been performed for this property prior to the hearing. He inquired as what the reasoning was for not requiring such an analysis.

Director McDonald advised that it was discussed with the architect and the Community Development Department recommended that one be put together. Part of the purpose of a traffic impact analysis was to identify changes in traffic patterns. The access to this property remained the same, with minor changes for the better. Currently, the property had two access points for parking where the hospital expansion would be located. Those two access points would, therefore, be reduced from a major arterial.

A second reason for a traffic impact analysis was to alleviate any concerns. City Staff was not overly concerned and had reviewed the plan with the City’s traffic consultants, Traffic Engineers, Inc.

Commissioner Frazier referred to the number of hospital beds, and advised that he was confused as to the exact number. Several numbers had been mentioned this evening.

Director McDonald advised that he believed that there would be a total of 19 beds and that he would review the parking requirements based on that number of beds.

Commissioner Frazier referred to added improvements that were mentioned in the project summary. He inquired as to an explanation for the “added improvements.” In other words, besides additional parking, what constituted “added improvements?”

Director McDonald believed that landscaping and a fountain were included as added improvements.
Commissioner Frazier asked if there had been any discussions related to the types of signage that would be needed and/or required around the new hospital.

Director McDonald advised that a sign currently existed that read “First Street Hospital.” He knew that signage had been included on the rendering of the building that had been submitted. City Staff would review that signage, which was a separate permitting issue.

Commissioner Frazier referred to Block 3 and noted that he was unable to find a reference to that block in the summary.

Director McDonald indicated that he would have to look for that and get back with Commissioner Frazier.

Chair Bill Thorogood referred to the City’s Comprehensive Plan and noted that it really was about commercial redevelopment, a large sector of which was on the north side and the downtown area of Bellaire, for things like housing choices--mid-rise and multi-use, and multi-purpose use. From his perspective, he really appreciated the development being proposed.

Chair Thorogood indicated that his primary concern was related to the neighbors on the south side of the property. Right now, those neighbors were looking at the back of a one-story building. He inquired as to the plans to try to minimize lighting and any other impact that might affect the residents on the south side.

Mr. Grassle indicated that the two existing parking lot lights (15-20 foot-candles) were only about 20 feet in height. There were no plans to put anything worse on the site than already existed with respect to lighting.

Chair Thorogood asked if the parking lot lights would be moved closer to the houses.

Mr. Grassle stated that one light would be located about 60 feet away from a residence. The other light was another 80 feet away from a residence.

Chair Thorogood asked for confirmation that this would be different from what was in place currently in terms of the lumens power that would exist on the neighbors today.

Mr. Grassle advised that he did not believe the neighbors would be affected at all. The lighting would be directed downward. He stated that he could provide a foot-candle photometric of that area to the Planning and Zoning Commission on Tuesday.
Chair Thorogood advised that there had been some issues with institutions located in neighborhoods resulting in glare issues. He asked if there were anything that could be done to diffuse, mitigate, turn, or angle the lights in any way so that what was not there today, but would be tomorrow, reduced the impact for the neighbors to the south.

He referred to the barrier between the site and the residences and noted that it consisted of landscaping. He inquired as to whether that landscaping would consist of trees or bushes.

Mr. Grassle stated that it could be any type needed. It could be bamboo if more height were needed. If something were required to create a little more separation, he would be happy to investigate that.

H. QUESTIONS FROM THE CITY COUNCIL OF THE CITY OF BELLAIRE, TEXAS – Mayor Cindy Siegel.

Mayor Cindy Siegel asked Director John McDonald, Community Development Department, to go through the story requirements of the area and asked for confirmation that, in the future, the applicant could not build a structure greater than two stories.

Director John McDonald, Community Development Department, advised that the height limit was two stories and that the applicant could not build a structure greater than two stories unless City Council rezoned the area.

Mayor Siegel asked for confirmation that if the applicant made any changes to the plan submitted for a specific use permit, the application would have to go through the specific use permit process again.

Director McDonald advised that Mayor Siegel was correct.

Mayor Siegel referred to Dr. Varon and advised that she had heard from a neighbor living nearby regarding the lighting. That neighbor indicated that Dr. Varon had changed the lighting to accommodate the neighbors. She assumed that Dr. Varon and his architect could do something similar if that was an issue in the new parking lot.

Dr. Varon indicated that he was not specifically aware of who had complained or what specifically happened, but the lighting was changed based on the complaint received. The amount of light the pole was producing had been lowered.

Mayor Siegel noted that the neighbor was very happy about the change that had been made. She indicated that the biggest complaint she had received as Mayor regarding the area in which the hospital was to be expanded related
to the parking issues surrounding SSQ. She understood that SSQ was moving and if she understood the quasi-traffic study, the traffic would drop from 694 to 260. She asked if this reduction were specifically related to the fact that SSQ was moving to another area of town.

**Dr. Varon** indicated that, in his opinion, the reduction in traffic did specifically relate to the fact that SSQ was moving. SSQ had several hundred customers each night and those customers were parking everywhere (including the streets). He indicated further that the traffic study was apparently conducted under the assumption that the hospital would have 27 beds when, in fact, there would only be 19 beds. For that reason, he felt that the traffic impacts would be even less than reported in the study.

**Mr. Grassle** stated that the traffic impacts would be far less because the traffic study did not taken into account the nighttime traffic occurring in the area.

**Dr. Varon** indicated that family members usually visited patients for one-three hours and those members went home in the evening, so traffic related to those visiting the hospital should be fairly low.

**Mayor Siegel** referred to the additional beds proposed for the hospital expansion. She inquired as to whether additional staff would be needed for the expanded facility. In other words, would parking be required for employees of the hospital?

**Dr. Varon** stated that the employees to be hired for the expanded facility would include nurses only. He anticipated hiring between three to five nurses. All of the employees were instructed to use parking spaces contracted by Dr. Varon and his partners in the garage of the office building located across the street from the facility.

**Mayor Pro Tem Phil Nauert** referred to Director McDonald and noted that the R-M.2 Zoning District allowed for a two-story height. He inquired as to the maximum ridge height for a facility in that zoning district.

**Director McDonald** indicated that there was a 40-foot maximum ridge height if parking were allowed beneath the hospital structure.

**Mayor Pro Tem Nauert** noted that the structure could look like a three-story building as a result, even though there were only two “finished” floors due to heating, ventilation, and air conditioning equipment, etc., that could be located on a floor at grade.

**Director McDonald** advised that Mayor Pro Tem Nauert was correct.
Mayor Pro Tem Nauert advised that he wanted the neighbors to understand that the zoning did allow for that type of construction, although this particular project did not call for it.

Councilman Andrew Friedberg referred to the resident across Bissonnet Street on Beech Street that had addressed the Planning and Zoning Commission and City Council earlier in the evening. When looking at the layout of what was being proposed, the portion immediately by the neighbors to the south was already built out. He asked if City Council were limited as to where conditions could be placed for the plan being shown or if City Council could add buffering if City Council determined it was needed along the south side of the property.

Director McDonald indicated that he believed City Council could add buffering. The applicant was required to install an eight-foot fence if one did not currently exist to separate commercial from residential areas. He would think anything that City Council felt was appropriate, as long as the City Attorney felt it were not arbitrary and capricious, could be added as a condition.

Councilman Friedberg asked for confirmation that the current restaurant onsite required 88 parking spaces.

Director McDonald indicated that restaurants required ten spaces per 1,000 square feet. It was reported that the restaurant consisted of 8,800 square feet.

Councilman Friedberg inquired as to whether the restaurant was changing or becoming smaller square footage-wise under the proposal.

Dr. Varon indicated that the restaurant was not changing as far as he knew.

Councilman Friedberg advised that in looking at the proposal, there would only be 91 parking spaces available for the entire site.

Director McDonald advised that the restaurant currently did not have enough parking spaces. The restaurant had nonconforming life with regard to those parking spaces. The City would then look at the total capacity of all of the parking spaces with regard to the uses in play and at the new proposed uses related to parking. He believed that the new proposed uses would show a freeing up of parking spaces or a reduction in the overall count.

Councilman Friedberg stated that he did not believe the freeing up of parking spaces based on the new proposed uses was shown on the plan in front of City Council and the Planning and Zoning Commission. In other words, there were still only 91 parking spaces available.
Director McDonald indicated that retail spaces required greater parking ratios than a hospital. Replacing some of the retail businesses with the expansion of the hospital would reduce the parking requirements overall for the site.

For example, the removal of 10,000 square feet of retail businesses would free up 40 parking spaces. The hospital would require only 15 spaces.

Councilman Friedberg advised that he understood the net benefit in that regard, but asked for confirmation that the specific use permit did not afford City Council the opportunity to revisit the restaurant’s parking spaces. In other words, the City was starting with a nonconformity.

Director McDonald stated that Councilman Friedberg was correct. The City had tried its best to maximize the parking for the area, but the existing restaurant was currently on a separate parcel from the parcel that was the subject of a specific use permit.

Councilman Friedberg advised that the reason that he thought this situation might be different was the fact that the landlord requesting the specific use permit also owned the parcel that the restaurant was located on. Whenever the opportunity arose in the City to address what could be a problem, he wished to do so, but certainly not at the applicant’s expense for the specific use permit portion. In looking at the site as a whole, he was concerned with potential parking problems at peak restaurant hours.

Mayor Siegel asked if Councilman Friedberg could call the City Attorney regarding the issue and ensure that Director McDonald was aware as well.

Councilman Friedberg advised that he would be happy to do so. He asked the applicant if the $4.2 million project valuation listed within the application was related to the hospital expansion only or if that valuation related to the entire site.

Dr. Varon stated that the valuation was related to the entire site.

Councilman Friedberg asked Dr. Varon if he recalled what the value of the property was approximately three and one-half years ago when Dr. Varon acquired the property. In other words, what was the increase in the property valuation as a result of the hospital expansion?

Dr. Varon stated that he honestly did not remember and did not want to give City Council a number that was not correct.

Councilman Friedberg asked if the architect had an idea as to the increase in valuation based on the expansion.
Dr. Varon stated that the $4.2 million on the application was related to the hospital expansion. He apologized indicating that he had not understood the question that Councilman Friedberg had asked.

Councilwoman Mandy Nathan referred to the parking situation, noting that it would not technically comply with the City’s requirements because a property was included that was not part of the specific use permit. She referred to the determination of the impervious surface percentages and inquired as to what was included in that determination. For example, was the retail center included?

Director McDonald advised that the portion of the retail center to be removed for additional parking was taken into account in the impervious surface percentage calculation.

Councilwoman Nathan referred to the relocation of the sanitary sewer line and indicated that Director McDonald’s report indicated that it was unclear as to how long the relocation would take. She asked if it were possible that the relocation, if approved, would be a problem if the applicant needed to complete their construction within the next six months.

Director McDonald stated that the City would build a new line along Bissonnet Street and cut off the old line on the Bissonnet Street side. The old line would be given to the applicant, and the applicant would be responsible for that portion of the line on their property.

Councilwoman Nathan inquired as to how many ambulances per day came to First Street Hospital.

Dr. Varon stated that he believed that three ambulances per week visited First Street Hospital. Family members dropped off the majority of the patients at First Street Hospital. Life and death type of emergencies were not dropped off at First Street Hospital.

Councilman Will Hickman referred to Chair Bill Thorogood and asked for confirmation that the Planning and Zoning Commission would consider the specific use permit on Tuesday evening and send their recommendation to City Council for their May 3, 2010, meeting.

Chair Thorogood advised that Councilman Hickman was correct.

Councilman Hickman referred to Lenox Hill Holdings, Ltd., and asked for confirmation that they could build a restaurant, shop, or other permitted use without having to go through the specific use permit process and public hearings.

Director McDonald advised that Councilman Hickman was correct.
Councilman Hickman asked for confirmation that the City was just looking at the fact that Lenox Hill Holdings, Ltd. wanted to build a hospital and not one of the permitted uses.

Director McDonald advised that Councilman Hickman was correct.

Councilman Hickman asked for confirmation that there were currently sidewalks on the south side of Bissonnet Street and, if so, if there would still be sidewalks on the south side after the new construction was completed.

Director McDonald advised that Councilman Hickman was correct.

Councilman Hickman asked if there would be any differences in the size of the driveways.

Director McDonald stated that there would be some minor changes to the entranceway off of Bissonnet Street, as recommended by the City’s traffic consultants.

Councilman Hickman asked for confirmation that the sidewalk situation would actually improve as a result of the smaller driveways.

Director McDonald advised that Councilman Hickman was correct.

Councilman Hickman inquired as to whether a doctor or dentist’s office could open in one of the existing spaces in the retail center.

Director McDonald advised that such an office could open, as it was a permitted use.

Councilman Hickman referred to Dr. Varon and inquired as to whether the Radio Shack located in the retail center was staying or leaving.

Dr. Varon advised that Radio Shack had not made a decision. The store was located in a part of the center that was going to be demolished, but had been offered a spot in the existing retail center. The store was undecided because they advised that the store was not producing the money that they normally expected to produce. In the meantime, Radio Shack was leasing on a month-to-month basis.

Councilman Hickman as to whether all of the parking shown near the restaurant would be open or if that parking would be valet parking as well.

Dr. Varon advised that during the construction period, valet parking would be offered to all tenants in the retail center for free. After construction, the valet parking station would be moved to the front of the hospital. He and his
partners had not addressed whether or not the retail center would have a need for the valet parking.

**Councilman Hickman** asked for confirmation that during construction there would be fewer parking spaces available.

**Dr. Varon** advised that Councilman Hickman was correct.

**Councilman Hickman** asked for confirmation that the west one-third or one-half of the existing retail center was the portion to be demolished (i.e., the section with the shorter roof).

**Dr. Varon** advised that Councilman Hickman was correct.

**Councilman Hickman** referred to the emergency room and inquired as to whether Dr. Varon wanted local traffic. For example, Councilman Hickman had three children and if one broke an arm or leg, would he be able to bring them to First Street Hospital?

**Dr. Varon** stated that the emergency room currently serviced patients that came to the center with broken bones or lacerations, pneumonia, etc. He would love to have Councilman Hickman’s children or the children of anyone else in the emergency room. The emergency room was capable of stabilizing a patient with heart pains or heart issues and, if necessary, could then transfer that patient to Methodist, St. Luke’s, or Hermann for a cardiac catheterization or open-heart surgery.

**Councilman Hickman** referred to the First Street entrance under the sky bridge or breezeway and a black line in the middle that connected to a triangle on the survey. He inquired as to what the symbols meant.

**Mr. Grassle** advised that the area that Councilman Hickman referred to was an existing area for equipment for the surgical center.

**Councilman Hickman** inquired as to whether the area was open for driving.

**Mr. Grassle** advised that it was enclosed and the line was not part of the project.

**Councilman Hickman** inquired as to whether the line represented a wall.

**Mr. Grassle** indicated that the line did represent a wall.

**Councilman Hickman** inquired as to the gap between the existing commercial area and the surgical center.
Mr. Grassle stated that the gap was existing parking for the surgical center and would not change as a result of the hospital expansion.

Councilman Hickman asked Director McDonald if City Council could put some type of condition in the specific use permit on directional lighting or foot-candles.

Director McDonald indicated that he believed the City’s Zoning Code covered lighting.

Councilman Hickman advised that it sounded as if the light poles were being moved from another location closer to the homes on the south side. He was interested in doing something to help those residents.

Mayor Siegel noted that City Council had done something similar when considering the specific use permit for Pin Oak Middle School.

Councilman James P. Avioli, Sr., indicated that his concerns had been addressed.

Councilman Corbett Daniel Parker indicated that he was very appreciative of Dr. Varon’s willingness to do business in Bellaire and thanked him for that.

In talking with a number of people who had dealt with Dr. Varon, he noted that Dr. Varon had a nice reputation in the community.

He referred to the fact that Dr. Varon indicated that notice to the tenants of the surgical center was not really necessary. He inquired as to whether Dr. Varon had discussions with the tenants regarding the expansion project.

Dr. Varon had been talking back and forth with tenants for a long time. Obviously, the conversations had been intensified within the last few days as Dr. Varon had prepared to come before City Council and the Planning and Zoning Commission this evening.

Councilman Parker referred to the tenants that planned to stay and inquired as to the concerns that those tenants had expressed to Dr. Varon.

Dr. Varon indicated that the only concern he had heard was from the owner of Lotus Nails and her concern was whether or not she would still have two or three reserved spaces for her business. He assured her that she would have those reserved spaces after the construction. Charlie’s Bar-B-Que Restaurant had some concerns with parking and Dr. Varon and his partners offered him free valet parking. He only asked that he be kept posted of the progress on the project. He was excited that the lease on SSQ was expiring, as he wanted to be open a little later in the evenings and wished to be able to utilize more parking spaces.
Councilman Parker inquired as to Dr. Varon’s expectations with respect to signage for the hospital expansion and for Charlie’s Bar-B-Que. He asked specifically if the Charlie’s Bar-B-Que sign would remain.

Dr. Varon indicated that the existing sign could not remain where it was currently located due to the new construction. Dr. Varon had been talking with Charlie and Charlie advised that the City of Bellaire would not allow him to have a post with a yellow sign on top of it. They discussed the possibility of installing a sign on the west side of the property.

Councilman Parker asked if Dr. Varon planned to move the sign on the west side.

Dr. Varon advised that the sign could not be moved because the City’s sign requirements would not allow it.

Councilman Parker asked for confirmation that Dr. Varon had discussions with Charlie about the sign, but a decision as to the new location of a sign had not been decided.

Dr. Varon advised that Councilman Parker was correct. He pointed to some open area on the plan and indicated that the signage might be located somewhere within that open area.

Councilman Parker asked if Dr. Varon was willing to undertake the construction in stages or whether it would be performed all at one point in time.

Dr. Varon indicated that he needed to move forward as fast as he possibly could so that the construction was completed prior to year-end.

Councilman Parker noted that during the time that a portion of the commercial center was demolished for additional parking, there would be a great reduction in onsite parking. He understood that Dr. Varon would make up for through the valet parking contract.

Dr. Varon advised that Councilman Parker was correct.

Councilman Parker asked if there were any communications with tenants to let them know that a portion of the center would be demolished and parking lot added prior to construction of the expansion of the hospital.

Dr. Varon indicated that he had not communicated that specifically to the tenants. There were discussions with them regarding the fact that a portion of the commercial center needed to be demolished in order to add the parking spaces required by the City’s regulations. He did not recall any discussion of the timeline in which that would occur.
If he and his partners were given permission by the City to purchase the street and expand the hospital, the plan was to demolish the necessary portion of the commercial center first for parking.

Councilman Parker referred to a statement made by Dr. Varon that a small cafeteria would be constructed in the hospital. He asked if there were plans to provide food beyond vending machines.

Dr. Varon stated that the plans were to have coffee and vending machines, which was what existed currently.

Councilman Parker referred to a statement by Dr. Varon that he might have plans with Charlie to cater food for the hospital expansion.

Dr. Varon stated that Charlie had asked if it were possible for him to locate a restaurant inside the hospital or do something with the food. Due to multiple regulations, it was not possible for the hospital to allow a restaurant inside. He indicated to Charlie that he might be able to find a way that the hospital could do something with him with regard to coffee, drinks, and sandwiches.

Councilman Parker inquired as to whether Dr. Varon had any concerns as to reduced visibility for the restaurant, nail salon, or any other tenants remaining in the commercial center as a result of the construction.

Dr. Varon stated that he obviously had a concern, but the tenants were totally aware of what was happening and those tenants decided to move forward with their leases regardless of the proposed construction. He and his partners were trying to give Charlie’s and other tenants as much exposure as possible, but Charlie’s, would be in the back. Charlie was given the opportunity to break his lease, but he advised that he would like to stay because most of his regular customers already knew where he was located.

Councilman Parker asked if the movement of the sanitary sewer lines would affect the ambulances coming into the hospital.

Director McDonald indicated that it would not affect the ambulances. The lines were currently located where ambulances entered the hospital now.

Councilman Parker advised that his concern was the effect on ambulances during the construction involved to move the lines.

Dr. Varon cautioned City Council not to expect the ambulance traffic to be similar to that of Hermann Hospital. There was very little ambulance traffic—three to four per week.
Councilman Parker stated that the traffic study indicated that there was no reduction to the commercial space in relation to the restaurant. He inquired as to whether there were studies related to what occurred when a neighborhood restaurant completely lost their visibility from a major arterial. In other words, would such a situation result in a loss of business for the restaurant?

Director McDonald referred to a group that set industry standards for restaurants. He did not think they had numbers specifically for restaurants on a particular site, but the group might have information in that regard.

Councilman James P. Avioli, Sr., inquired as to whether Dr. Varon presently had security on the property.

Dr. Varon advised that he did have security 24 hours per day.

Councilman Avioli inquired as to whether the amount of security provided would have to be expanded as a result of the addition to the hospital.

Dr. Varon stated that he had talked with the security company currently used and a decision had not been made as to the exact manpower that would be needed to continue covering the area. The main job of the security firm was the parking lot, hospital, and surgical center.

Councilman Parker referred to the west side of the property and inquired if that were the location for Dr. Varon’s office.

Dr. Varon advised that Councilman Parker was correct.

Councilman Parker asked if there had been any concerns from visitors or patients with respect to the wall located in that area. In other words, had the wall impeded the vision of those trying to exit onto Bissonnet Street?

Dr. Varon indicated that he had never heard anything about it. His office had been located in that area for one and one-half years.

I. CLOSE OF JOINT PUBLIC HEARING – Mayor Cindy Siegel.

Mayor Cindy Siegel closed the Joint Public Hearing before the City Council of the City of Bellaire, Texas, and the Planning and Zoning Commission of the City of Bellaire, Texas, regarding an application and request for a specific use permit to construct and operate a hospital at the corner of Bissonnet Street and First Street at 8:41 p.m. on Monday, April 26, 2010. Mayor Siegel advised that public comment would not be received following the joint public hearing. Written comments could be submitted to City Council in care of the City Clerk prior to final deliberation on the matter. It was anticipated that final deliberation by the City Council
would occur on Monday, May 3, 2010. Written comments should, therefore, be submitted to the City Clerk by noon on Thursday, April 29, 2010, in order to be considered for the record. The Planning and Zoning Commission planned to deliberate on the matter in a Special Session to be held on Tuesday, April 27, 2010.

J.  ADJOURNMENT.

MOTION TO ADJOURN THE PLANNING AND ZONING COMMISSION:

A motion was made by Commissioner Paul C. Simmons and seconded by Commissioner Peter Boecher to adjourn the Special Session (Joint Public Hearing) of the Planning and Zoning Commission of the City of Bellaire, Texas, at 8:44 p.m. on Monday, April 26, 2010.

VOTE ON MOTION TO ADJOURN THE PLANNING AND ZONING COMMISSION:

Motion carried unanimously on a 7-0 vote as follows:

FOR:  Thorogood, Bill
       Doyle, Michael
       Aylett, Lori
       Boecher, Peter
       Frazier, Winfred
       Rickenbacker, Donna
       Simmons, Paul C.

OPPOSED:  None

ABSENT:  None

MOTION TO ADJOURN THE CITY COUNCIL:

A motion was made by Mayor Pro Tem Phil Nauert and seconded by Councilman Andrew Friedberg to adjourn the Special Session (Joint Public Hearing) of the City Council of the City of Bellaire, Texas, at 8:44 p.m. on Monday, April 26, 2010.

VOTE ON MOTION TO ADJOURN THE CITY COUNCIL:

Motion carried unanimously on a 7-0 vote as follows:

FOR:  Siegel, Cindy
       Hickman, Will
       Avioli, James P., Sr.
       Parker, Corbett Daniel
FOR (CONT.): Nauert, Phil
    Friedberg, Andrew
    Nathan, Mandy

OPPOSED: None

ABSENT: None

Respectfully submitted,

__________________________________
Tracy L. Dutton, TRMC
City Clerk
City of Bellaire, Texas

Approved:

__________________________________
Cynthia Siegel, Mayor
City of Bellaire, Texas

Approved:

__________________________________
Bill Thorogood, Chair
Planning and Zoning Commission
City of Bellaire, Texas